Exhibit 1

DECLARATION OF MARIE WILDRIGUE ERINAC MIOT

I, Marie Wildrigue Erinac Miot, declare:

Case 1:25-cv-01464-BMC

- 1. I have personal knowledge of the facts set forth in this declaration. If called to testify as a witness, I could do so and would testify to these facts.
- 2. I am a Haitian beneficiary of Temporary Protected Status (TPS). My current TPS status will expire on August 3, 2025 as a result of the government's "Partial Vacatur" of TPS for Haiti. My husband, Robert, is also a Haitian TPS recipient and he will also lose his TPS on August 3, 2025.

Background

- 3. I have been physically present in the United States since March 2010.
- 4. My husband, Robert, and I own a home in Medford, Long Island. We live there with our three children, the youngest of which is two years old. All of our children are United States citizens.
- 5. I am a registered nurse and am employed as a registered nurse. My authorization to work comes from my TPS status. I love being a nurse. It allows me to help other people. It is my goal to become a nurse practitioner one day so I can help people even more than I already do, but that would require me obtaining additional education.
 - 6. Robert is a school bus driver. His work authorization comes from his TPS status.
- 7. In addition to financially supporting ourselves and our children, Robert and I support four people in Haiti: my mother-in-law, my mother, and my two sisters. Haiti is an incredibly poor country. My mother-in-law and my two sisters depend exclusively on Robert and me to support them financially. My mother depends on me financially as well, but less so than my mother-in-law and sisters. Robert and I send my mother-in-law and sisters money about once a

month, and we have done so for about ten years.

- 8. The health insurance I get through my job as a nurse provides coverage for my whole family—myself, Robert, and our three children.
- 9. Robert has a life-threatening malignant cancerous tumor in his stomach, pancreas, and liver. He was diagnosed very recently, in October 2024. Robert gets treatment for his cancer at Sloan Kettering Memorial Hospital's campus in Nassau County.
- 10. Ultimately, Robert will need surgery to treat his cancer. The tumor is too large to operate on at present, so his doctor has prescribed him a targeted therapy drug (called Imatinib) to try and shrink the tumor to the point where it could be removed surgically. Robert's doctors told him that the Imatinib does not actually treat the underlying cancer, it just stops the cancer from growing and hopefully shrinks it. Robert has to take Imatinib every day and according to his doctor will have to continue taking it for the remainder of his life. The doctor told Robert that if he stops taking Imatinib the cancer will grow.
- 11. So far, it has shrunk the tumor a bit, but not enough for the necessary operation. Robert has a scheduled follow-up appointment with his oncologist in late March 2025 to reassess whether the tumor has shrunk enough to operate upon.
- 12. We worry every day about Robert's health—his cancer is life-threatening as it is, but without proper treatment it is almost certainly a death sentence.
- 13. Despite his cancer, Robert continues to work. He is in constant pain and discomfort, but he works through it. Robert's health is a constant source of stress, anxiety, and sadness for our entire family. We pray for his health every day.
- 14. I have health concerns as well—specifically, I suffer from severe asthma. As a result of my asthma, I carry an albuterol inhaler with me at all times; it's a medication I need to

save my life in case I have an asthma attack. My asthma is obviously not as serious a health condition as Robert's cancer, but it is a constant worry for my personal health because if an untreated asthma attack is severe enough it could put me in the hospital or even kill me.

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15. Our two-year old child also has significant health concerns—she is severely allergic to dairy products and peanuts. She is so allergic to cow's milk that we do not even keep it in the house. Because of her allergies, she has to carry an EpiPen with her everywhere. She reacts very badly to dairy and peanuts; if she is exposed to these allergens she will go into anaphylaxis. If she goes into anaphylaxis and is not properly treated, she might die.

Impact if TPS for Haiti Ends

- 16. If TPS is terminated Robert and I will suffer immense harm. Our primary concern is Robert's health. When TPS ends, I will lose my work authorization, which means that not only will Robert and I lose our jobs and our incomes, but I would also lose my health insurance. Because my health insurance pays for Robert's cancer treatment, if I lose my health insurance I do not know how we will be able to afford Robert's Imatinib, which he needs to survive. And if I lose my health insurance there is no way we will be able to afford the surgery Robert will ultimately need to treat his cancer. So if we lose our TPS, Robert will probably die as a result.
- 17. If we lose our TPS, and I lose my health insurance, I will also not be able to afford my albuterol. If I cannot afford my albuterol, I will not be able to treat a severe asthma attack. If I cannot treat a severe asthma attack, I might die.
- 18. If we are forced to return to Haiti, things would be much worse for our health situation. Haiti does not have a functional health care system. The hospitals are mostly located in Port-au-Prince, and gangs control Port-au-Prince including the hospitals, so it would be dangerous for us even to try and go to the hospital. In order to safely go to the hospital we would

need to hire a private car with private security, which we cannot afford.

- 19. And even if we were able to make it to a hospital, Robert cannot obtain his Imatinib in Haiti—and that is the drug that is stopping his tumor from growing and killing him. Robert also cannot get the surgery he needs in Haiti.
- 20. I would also not be able to get the drug I need to treat my asthma, albuterol. When I lived in Haiti, I often had asthma attacks and had to be hospitalized about four times. But now things have gotten so bad that I probably would not be able to even go to the hospital because of the gang violence. And there is no ambulance service in Haiti.
- 21. Disease is everywhere in Haiti—for example, lately there have been outbreaks of cholera. Robert is immunocompromised due to his cancer and his cancer treatments. If he catches cholera, he will be more vulnerable than people with fully functional immune systems, and will be more susceptible to get severely ill or die. And again, because Haiti has no real functional health care system, if either of us caught a disease like cholera, it is very unlikely we would be able to get treatment for it. Medications just are not widely available.
- For the same reasons, if my two-year-old child were to come to Haiti with us, we 22. would not be able to access the medical care she would need to treat her severe allergies to dairy and peanuts. Medications are just not widely available in Haiti, including epinephrine.
- 23. To put it simply: if my family is forced to return to Haiti our lives would be in danger due to our health conditions. I worry about this every day. Thinking about these things makes it hard to sleep at night. I am fearful for my family's safety and especially for the safety of my husband and children. Even thinking about these possibilities is a nightmare for me and my family.

- If our family is forced to return to Haiti, we would also be in danger due to the 24. violence. The gangs are in charge of Haiti right now, and they target people from the United States for kidnapping and ransom because the gangs believe that if you lived in the United States you have money. So, I and my family would be targets for kidnappers. And because I am a woman I would also be targeted by the gangs for rape.
- 25. I would not be able to go to the police for protection from the gangs, either, because the police are corrupt and can easily be bribed by the gangs into telling the gangs who you are. The only way to protect yourself from the corrupt police is to bribe them with more money than the gangs are willing to pay, which we cannot afford.
- The threat posed by gangs is a real concern for me because I personally know of 26. people who have been killed by gangs. My brother lives in Port-au-Prince; he works for Doctors Without Borders. The violence is so bad that Doctors Without Borders has to provide him with security protection just so he can get to work. His colleague, a female urologist, was coming out of the clinic with her father, who also was a doctor, when she and her father both were almost kidnapped by a gang. They resisted the gang's attempt to kidnap them. Because they resisted the gang, the gang killed them. This happened within the last year. My brother does not have stable housing because of the violence; the gangs are trying to take over the neighborhood where he lives so he and that area's other residents are on the run, trying to leave the area because of the insecurity.
- 27. If Robert and I were forced to return to Haiti, we would face an impossible choice: we would have to decide whether to take out children with us. If we took our children with us, they would immediately become targets for kidnapping and murder. But they would not be able to

fend for themselves in the United States, either.

- 28. If we had to return to Haiti, we would have nowhere to live. The place I used to rent when I lived in Haiti was destroyed by the 2010 earthquake. I have absolutely nothing and nobody in Haiti except the people that I support financially who would be completely unable to house or care for me. I am the one who sends them money for the rent they have to pay.
- 29. If we had to return to Haiti, we would not have enough to eat. I have no idea what we would do for food. People are starving in Haiti. It is a nightmare to think about.

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I declare that to the best of my current knowledge that the foregoing is true and correct. Executed

on this 11th day of March, 2025.